



# Pediatric Cardiology: A Year in Review

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The mission of *The Journal of Pediatric Cardiology* is to publish scientific work focused on the research of Congenital Heart Disease (CHD). Its goals are to support the work of scientists and clinicians in the field by publishing their original research and provide global access to their findings.

As the incoming Editor-in-Chief (EiC) for *Pediatric Cardiology*, I wanted to share with you my reflections on the past year as well some of the exciting changes that are underway at the Journal. I would like to thank the authors, reviewers, and associate editors for their continuing support, scientific commitment, and contributions to the success of the Journal and the peer-review process. I would also like to specifically thank Dr. Ra-id Abdulla who, as the Journal's EiC for the last 22 years, has helped build and shape much of the editorial work and assembled a highly recognized team of associate editors. His tremendous contributions to the Journal have laid a solid foundation and illuminated a successful path forward for the Journal, which continues to attract major original manuscripts focused on Congenital Heart Disease (CHD). I am honored to have been selected to continue his legacy and I cannot thank him enough for his guidance and tutelage as I take the reins.

Over the course of 2022, we witnessed new beginnings and processes as we continue to recover from a seemingly intractable pandemic whose ramifications continue to impact our daily lives on multiple fronts. As I assumed the role of EiC, I initially thought I wanted to focus on different ideas that would take the Journal in a new direction. However, I was quickly impressed by the high-quality research and peer-review work that authors, reviewers and editors from various institutions and countries provide for the Journal. After a major change in the editorial platform used by Springer, the Springer Nature Article Processing Platform (SNAPP), I also realized that instead of focusing on new directions, I needed to focus on helping support the team in improving

the new system as well as the authors and editors using this system to improve its features.

In this editorial, I will provide an overview of the data we routinely work with at *Pediatric Cardiology*, the new submission and review process, our editorial team, what we accomplished in 2022, and what we have planned for the year to come.

## State of the Journal: Submissions and Numbers

Launched in 1979, *Pediatric Cardiology* was the first international journal dedicated to this specialty. It aimed to consolidate most of the pediatric cardiology articles that were scattered among various other medical journals. Its first issue was dedicated to Dr. Edward Lambert, who started planning this work as a joint Editor [1]. Springer International initially published the Journal on a quarterly basis. Since then, the Journal has published over 259 issues in 44 volumes and currently publishes eight issues per year!

The last two years have been the most successful in the Journal's history. The Journal received a record number of manuscripts, over 80% of which were original studies and 10% consisting of review papers. Despite the increase in submissions, the journal's acceptance rate has been consistently stable. It continues to focus mainly on original research in the field of pediatric cardiology and supports young scientists in the field in an effort to shed light on their academic work to make it globally accessible.

One particular area of interest is the rapidly growing field of fetal cardiology. The Journal has witnessed a steady increase in the number of original submissions focused on fetal CHD. Of note, these papers tend to have a high citation rate at about 4.58 per article and 745 downloads per article, likely reflecting the paucity of research that still pertains to this subspecialty, which I expect to continue growing exponentially in the years to come. I do encourage authors working in this subspecialty to submit to the Journal as this topic is of particular interest to the community and our readers.

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## Pediatric Cardiology in the World

*Pediatric Cardiology* is truly an international journal. This is not only reflected in the makeup of its board which is composed of editors and reviewers from across the globe and working at various internationally-renowned institutions, but also in the countries from where submissions originate. In 2022, the five countries which generated the most publications included the United States (64%), Japan (5%), Turkey (4%) Canada (3%), and Germany (3%). In 2021, the top five were the United States (55%), China (6%), Japan (4%), Canada (4%), and Germany (4%).

The international character of the journal can also be discerned from its subscribers. In 2022, Journal articles were digitally downloaded 478,490 times across the world. This is a marked increase from 413,383 in 2021 and 321,091 in 2020. The importance of these numbers is beyond pure mathematics. It reflects how well the Journal is regarded on an international scale.

The Journal's Impact Factor has also steadily increased over the years reaching 1.838 in 2021, which is an increase from 1.655 in the previous year and 1.564 in 2019. Its 5-Year Impact Factor has also continuously improved and reached 1.958 in 2021, up from 1.584 in 2019. The Journal's h5-index also jumped to 32 in 2021. This means that 32 articles from *Pediatric Cardiology* were cited at least 32 times. In 2020, that number was 30 and in 2019, it was 28. As such, I am particularly fortunate to inherit the Journal in this current state.

## The new submission platform and the review process

In early 2022, *Pediatric Cardiology* transitioned to a new editorial platform, SNAPP, as the main platform for managing the submission and review process. *Pediatric Cardiology* joined a number of other journals that have already transitioned to the new system, which utilizes artificial intelligence (AI) and machine learning (ML) technology to deliver enhanced functionality to improve and streamline the peer-review process.

One of *Springer Nature*'s main goals in building the new editorial management platform is to support editors in finding the right reviewers quickly and easily. The new platform uses AI to direct editors with various choices for suitable reviewers from the Journal's database as well as from the full *Springer Nature* database of reviewers. This database is generated via an AI-supported database of author information, gathered from Web of Science. New submissions undergo internal completeness and

consistency checks before being marked as ready for the editorial team. Manuscripts are then checked for suitability by senior journal editors before being assigned to an editor to take the manuscript through the peer-review process.

As with the introduction of any new technology, we recognize that it will take a bit of time for editors and reviewers to familiarize themselves with the new tools. My editorial team and I have been working to ensure a smooth transition to the new platform. I am happy to share that constant updates to the system, with major additions and improvements on finding reviewers through better AI-powered algorithms and updated automated workflow processes, will be released this year to also help with the time process and make it more intuitive and simpler to use.

## Handling Editors

The associate editors and reviewers who are members of our advisory editorial board include physicians, surgeons, and scientists in our field. The role of our advisory editorial board is essential to promoting the work of the Journal and its scientific progress. I cannot highlight enough their immense effort and commitment to this process. Due to the high number of submissions the Journal receives, senior editors can immediately reject articles after their initial review if they are not meeting the quality criteria or the aims and scope of the Journal. *Pediatric Cardiology* also continues to receive a large number of brief case reports. Although some of those might present some interesting cases, the board has largely opted not to publish such cases unless extremely unusual and rare while giving priority to original studies. Once a manuscript is deemed of interest by a senior editor, it is submitted for review by selecting reviewers from a large pool of reviewers that the Journal has amassed to help score its validity and scientific worth. Of particular note, I am pleased to mention that, out of 1,600 reviewers in our database, more than 300 contributed to reviewing at least one submission to the Journal during 2022.

In addition, we have increased the number of our associate editors to assist in reviewing the high volume of submitted manuscripts to the Journal. We currently have a total of 19 associate editors who handle the bulk of the manuscripts and submit their recommendations to the EiC to make the final decision based on their review (For a full list of our Editorial board, visit <https://www.springer.com/journal/246/editors>). I hope we continue to rotate the roles of associate editors every several years to bring in new talent and new views to the Journal. The Journal would not succeed without a strong Editorial Board, and I am confident that we are in good hands.

## Common Questions Regarding the Review Process

In addition to questions about the submission process, there are several questions that often arise regarding the review process. Some of the most common ones that authors and editors have asked include:

1. *Can authors select or recommend which handling editor or reviewers get invited to assess a particular paper and why doesn't the Journal assign papers to nominated reviewers?*

At Springer Nature, the process of peer-review is essential to selecting high quality papers that help advance the science in our field. As EiC, my primary role is to assign a paper to handling editors or reviewers that are best suited to review a paper and assess its scientific worth. The objective is always to publish top-quality papers and, hence, selecting the best review team to make these decisions as well as guiding authors in improving their manuscripts through the revision process is of utmost importance for the Journal. There is no bias in selecting handling editors or reviewers as this process is mainly driven by the expertise of the particular person and their availability to conduct the review. We continue to also improve the recently built-in AI-powered process for reviewer selections as well as providing a large database of reviewers from across Springer Nature's database.

2. *Is there a policy at the Journal of making a decision about a paper in two or more review rounds?*

There is no particular policy as to how many rounds a paper should go through before final acceptance or rejection. After an initial round of assessment and review, the handling editor can make a recommendation to the authors for revising their manuscript to make it more scientifically rich and help them clarify their data and research to the audience. The revised manuscript is then assessed further before making additional recommendations to the EiC as to accepting or rejecting it. Additional rounds of revisions and assessments might occur if the handling editors and reviewers feel the manuscript would benefit from additional changes other than proofing. The EiC then receives the final recommendation from the handling editor and in turn makes a final decision to the authors or at times might seek additional reviewers if needed. Hence, most papers typically go through two rounds of reviews and occasionally more if that is deemed necessary.

3. *What are the chances of my paper getting published in Pediatric Cardiology?*

Our acceptance rate has been quite consistent over the years. The Journal typically gives higher priority to original research studies. Case reports and small studies or those more intended for local audiences are less

encouraged and are more likely to be rejected. Certain topics, such as those related to fetal and interventional cardiology are preferred as noted above.

4. *Can previously rejected papers be submitted to Pediatric Cardiology?*

*Pediatric Cardiology* does allow the submission of articles rejected by other journals as long as they are not being concurrently considered for publication elsewhere. We would look at any paper that is believed to be of high quality and within the scope of the Journal's mission and of interest to its audience. In terms of papers previously rejected by *Pediatric Cardiology*, typically if the article is deemed of significant potential but needs major restructuring and analysis, authors could make significant changes and resubmit the article for consideration though that is usually handled by inviting the authors to revise the paper. If an article is rejected after several rounds of reviews, I would discourage the author from resubmitting it as it is unlikely to be accepted.

5. *What is the expected timeframe for a decision on a manuscript?*

We realize that authors get concerned about turnaround times for decisions on manuscripts submitted to the Journal. Our current average Turnaround Time (TAT) from the time of initial submission to first decision (whether it be acceptance, revision or rejection) is 24 days. In the event a senior editor recommends rejecting a paper, we try to ensure authors are notified early if we believe the manuscript is not of interest to the Journal and help authors avoid delays in getting the work published in another journal. The transition to the new SNAPP platform initially caused some delays in the time to decision for some papers. We should hopefully see significant improvement throughout the coming year as the new platform continues to be updated to make it more efficient by improving the AI-powered system, providing automated notifications for reviewers and editors, and as editors become more familiar with it. I have personally made a significant effort in tracking delays in decisions and I will be working with the board on making sure these numbers align with what has been a good trend for the Journal. We will continue to work towards that goal recognizing that exceptions do occur and are an opportunity to learn and avoid such occurrences in the future.

## Editorial News and Affiliations

The Journal recently embarked on a new venture through its affiliation with the Pediatric and Congenital Interventional Cardiovascular (PICS) Society. The PICS symposium, initially established in 1997 as a leading conference with live-case learning opportunities for those involved in interventions for congenital and cardiovascular disease,

has since evolved into a full-blown professional society in 2020. The mission of PICS Society highlights the need for promoting the highest quality care globally for infants, children, and adults with CHD through minimally invasive techniques. At the core of the society's values is its international perspective, commitment to the highest quality of care in the field of CHD interventions, supporting year-round accessible education, leading the development of guidelines in this relatively new and growing field of pediatric cardiology, its commitment to mentoring junior faculty in the field, and continuing its flagship event, the PICS symposium. As such, with the Journal's view of enhancing global research and supporting education in this field, the basis for the need for such an affiliation was evident to provide an academic platform that will help advance the educational and academic work in this field.

Through this affiliation, the Journal aims to support the publication of seminal original work and discoveries in the field of pediatric interventional cardiology. Improving outcomes for our patients depends largely on the results of technological developments that create new techniques, tools, and devices that can be used for clinical interventional treatments of adults as well as the youngest children with CHD. The need to support the knowledge and science behind this work is key to progress in our field. Through its affiliation with the PICS Society, *Pediatric Cardiology* will play a pivotal role in this process.

The highlights of the affiliation include:

1. *Pediatric Cardiology* Journal is the “official” journal of the PICS society;
2. Publication of abstracts from the society and its PICS meeting annually in *Pediatric Cardiology*;
3. Representation of the PICS Society on the Editorial Board of *Pediatric Cardiology* for interventional manuscripts; and
4. Support for the publication of review articles in the field of pediatric interventional cardiology.

This collaboration will enable both entities to work in harmony in the pursuit of a common goal: to make exponential progress in the field of CHD interventions more accessible, and more robust on an international level. This will also ensure a well-established peer-reviewed process that will streamline key research in this field. To continue to foster the progress of pediatric interventional cardiology, we, at Springer's *Pediatric Cardiology* feel that it is important for the Journal to continue to evolve to support and reflect the changes that are taking place in this relatively new field of medicine. Through this affiliation, *Pediatric Cardiology* will continue to be home to pioneering research that unveils new concepts and trials in the field of pediatric interventional cardiology and that will

potentially lead to better outcomes for our most challenging patients.

This is the beginning of a new phase for *Pediatric Cardiology* and for the PICS Society. With this affiliation formally in place, our editorial team is eager to engage with the PICS Society members as well as current and new authors to encourage the scientific members to submit original articles, review articles, and letters to the editor for consideration. We are proud to join forces with the PICS Society, a partnership which will no doubt help dramatically accelerate the growth of the science and original research in this profession. We hope this affiliation will also allow our audience to find first-hand access to exciting discoveries, tips and techniques in interventional pediatric cardiology and an opportunity to continue driving medical advances in our field for better patient outcomes across the globe.

## Looking Ahead

The coming year portends significant improvements in our platform to facilitate streamlining of the editorial process and improving the timeline for decisions on manuscripts submitted to the Journal.

In addition, we have recently created a new category of articles called “Perspectives” that we hope will attract more submissions. These are scholarly reviews and authoritative articles or discussions that tackle a particular topic or rapidly evolving issue and present the authors' position on the topic, supported by available evidence and expert experience and opinion. They are intended to help readers understand a complex issue, solve a problem, make a decision, suggest a new interpretation or share a process or build a service related to a clinical disease entity. They are differentiated from Review articles by combining factual content with expert opinion and, as such, are best suited for controversial areas or those in evolution.

*Pediatric Cardiology* is also planning to launch “article collections”. These will provide a space for articles dedicated to a specific topic and will be hosted by an expert in the field. Collections can be seen as a constantly growing online-only topical issues. We believe this would help researchers and colleagues tremendously in looking up key articles pertaining to a particular topic in congenital heart disease. We are in the process of further discussions to develop these collections for the Journal and we'd very much welcome your contribution to an article collection. Please keep your eyes open for upcoming calls for papers.

*In conclusion*, I want to personally thank all those who have contributed to the success of the Journal over the last few years, including the Associate Editors, advisory editorial board members, reviewers, and the editorial and production staff. As you may have already noticed, the Journal has

grown over the past years thanks to the dedication and effort of numerous members.

A lot has changed since the first issue of the Journal appeared in 1979. Over the past years and decades, much of the vision of the Journal's founders and original editors has come to fruition. As we enter 2023, there are more exciting developments on the horizon, including a focus on improving our platform and processing times, new article categories, and potential societal affiliations that are key to supporting educational efforts in our field. I cannot emphasize enough how important it is for authors to submit their best work for the journal to continue its success. I would like to thank the Editors as well as the hundreds of reviewers who have spent significant amounts of time assessing manuscripts over the past year. Special thanks to the editorial team at *Springer Nature* for their continued help and high-end skills to make the peer-review process easier.

Finally, I want to thank you, the reader, for your constant support of the Journal. Here's to a prosperous 2023!

Sincerely,

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## Reference

1. Editorial (1979) *Pediatr Cardiol* 1, 1. <https://doi.org/10.1007/BF02307334>.

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